

**Agreement for  
Division of Children and Family Services (DCFS) Region IV  
and  
King County Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD)**

**I. Subject**

The following Agreement terminates the original July 1, 2010 Agreement between MHCADSD, DCFS, and Therapeutic Health Services and begins a new Agreement between MHCADSD and DCFS Region IV effective immediately. This Agreement remains in effect unless terminated by consent of all parties. This Agreement will be reviewed annually for effectiveness, efficiency, and success in meeting the stated purpose.

**II. Purpose**

The purpose of this agreement is to outline the process for referring DCFS-involved parents to substance use disorder (SUD) assessment and treatment services within the King County (KC) provider network. Goals include increasing utilization of SUD assessments and treatment services by DCFS-involved parents; and, improving coordination among DCFS, MHCADSD, and the KC SUD treatment adult provider network.

**III. Definitions**

**A. Onsite Child Care**

Child care services provided, when needed, to children of parents participating in assessment and treatment activities, and support activities such as support groups, parenting education and other supportive activities when those activities are recommended as part of the recovery process and noted in the parent's treatment plan.

**B. Children's Administration (CA) - Parents in Reunification Program**

Funding for SUD assessment, detoxification, treatment, and case management services for clients who are not Medicaid eligible and are seeking to remain or reunify with their families.

**C. Low Income Clients**

Individuals whose gross household monthly income does not exceed the monthly income determined by 220% of the Federal Poverty Guidelines as described in the Department of Social and Health Services (DSHS) Low-Income Service Eligibility Table (Attachment A); updated biennially. These individuals are eligible to receive services partially supported by County Community Services funds.

**D. Indigent Clients**

Individuals receiving a DSHS income assistance grant (e.g., Disability Lifeline (DL), DL-Expedited (DL-X), TANF, SSI) or on a medical assistance program (Categorically Needy, Medically Needy, Medical Care Services). Usually identified by a medical coupon or Medicaid identification card. Food stamp recipients are not considered indigent patients unless they also receive one of the above grant or medical assistance programs.

E. Alcohol and Drug Addiction Treatment and Support Act (ADATSA)

A state fund for treatment and support to low-income or indigent patients assessed as alcohol or other drug dependent and is restricted to those who are unemployable as a result of their addiction. The Community Services Office (CSO) is the sole determiner of financial eligibility for ADATSA patients. All ADATSA eligible individuals are referred for treatment services by KC authorized ADATSA Assessment Agencies.

F. Expanded Substance Use Disorder Assessment

An expanded SUD assessment that includes a comprehensive interview, urinalysis (UA), and the use of two collateral contacts at a minimum resulting in a standardized written report that also shall include:

1. The presenting problem;
2. A basic psychosocial history including past and present drug/alcohol use (type, frequency, and duration of use);
3. An assessment of imminent or future risk of child abuse and neglect related to the parents' substance abuse;
4. Life effects of usage;
5. SUD diagnosis;
6. Specific treatment recommendations and estimated periods for completion;
7. Other services needed to initiate, establish, or maintain recovery such as mental health or domestic violence services;
8. Diagnostic instruments used in the assessment process;
9. UA results; and
10. Information obtained from at least two collateral contacts.

G. Global Assessment of Individual Needs Short Screener (GAIN-SS)

A two page questionnaire for general populations to quickly and accurately identify clients who have one or more behavioral health disorders (e.g., internalizing or externalizing psychiatric disorders, substance use disorders, or crime/violence problems), and would benefit from further assessment or referral for these issues. It also rules out those who would not be identified as having behavioral health disorders.

H. Mandated Reporter

Any person required by the Revised Code of Washington section 26.44.030 to report child abuse or neglect or the suspicion of child abuse or neglect.

#### **IV. Eligibility**

- A. Any person involved with DCFS that is referred for services by the DCFS SW.
- B. The following treatment funding programs are available to clients determined to be financially eligible:
  - 1. CA – Parents in Reunification
  - 2. ADATSA
  - 3. Low Income
  - 4. Indigent
- C. The DCFS SW should ensure that all clients are screened for Title XIX eligibility before referring the client to a treatment agency. State funds shall only be used as a payor of last resort.

#### **V. Responsibilities**

##### **A. MHCADSD**

Agrees to have assessment and treatment services available for DCFS clients at KC SUD treatment agencies.

##### **B. KC Provider Network**

- 1. Shall provide all services under this agreement as described in state requirements as determined by DSHS and the Division of Behavioral Health and Recovery (DBHR) and in compliance with the King County Chemical Dependency Services System Policies and Procedures (KCCDSS P&P) Manual and its revisions.
- 2. Shall provide the following array of core outpatient treatment and support services consistent with the KCCDSS P&P Manual: assessment, individualized treatment plans, face-to-face sessions, family treatment and support, group treatment, job seeking motivation and assistance, and case management.
- 3. Performs duties as a mandated reporter and reports all incidents of suspected child abuse within 24 hours to the local area Intake Line 1-800-609-8764 – After hours 1-800-562-5624. In addition, informs the referral source of the report made, including the date and the content, by the next working day after the report is made.
- 4. Shall designate a staff person to act as a liaison between their Agency and DCFS for purposes of referral and admission, and communication during the client's treatment stay and discharge planning.
- 5. Shall participate fully and completely in the Treatment and Report Generation Tool (TARGET 2000) and its successors for all County funded services as described in the KCCDSS P&P Manual.

### C. DCFS

1. Screens all parents using the GAIN-SS.
2. Coordinates with MHCADSD around the provision of services under this MOA including completing necessary documents and reports.

## VI. Referral Processes

### A. DCFS SW

If the DCFS SW determines from the GAIN-SS that a SUD assessment is indicated they shall refer the client to the agency of his/her choice within the KC adult provider network using the following procedure:

1. Inform the client of the referral and treatment process and potential financial costs;
2. Encourage the client to make an appointment while present and have the client identify himself/herself to the SUD agency as "DCFS" referred and indicate whether or not they are eligible for one of the treatment funding programs available. If the client is eligible for the CA – Parents in Reunification program they must be identified as "CA-Reunite". If client is unable to schedule at this time, DCFS will provide the client with the *Children's Administration Client Referral Form* (Attachment B);
3. Complete the *Chemical Dependency Referral Form* (Attachment C) and get the client signature on the form *Consent to Release Confidential Information* to ensure that there can be information exchange between the Agency and DCFS; and
4. Fax the completed referral and consent forms to the chosen Agency. A copy of the referral and the consent form will be retained in the client's file. The hard copy of these forms and any additional information (i.e. police reports, Child Protective Services (CPS) referral, medical and mental health evaluations) shall be mailed to the treatment agency the same day.

### B. SUD Treatment Agency

1. Shall provide services consistent with state policy, federal block grant requirements, and the KCCDSS P&P's for persons in the following priority categories:
  - a. Pregnant injecting drug users;
  - b. Pregnant substance abusers;
  - c. Injecting drug users; and
  - d. Washington State defined priority populations as defined in the KCCDSS P&P.
2. Receives and retains the referral and the consent form until the client or the SW contacts the Agency.

3. Provides priority appointments and completes a face-to-face initial contact within five working days from the day the appointment was requested by the client or the SW. When the Agency must access interpreter services, the priority appointment will be scheduled as services are available.
4. Completes the "Scheduled Appointment Contact Status" section of the *Chemical Dependency Referral Form* (Attachment C) and faxes it to the SW.
5. If the Agency is unable to schedule an appointment within five working days, the Agency shall refer the client to another SUD treatment agency. The Agency completes the "Unable to Schedule Appointment Contact Status" section of the *Chemical Dependency Referral Form* (Attachment C) and faxes it to the SW.
6. If the client does not keep the appointment, the Agency completes the "No Contact Status" section of the *Chemical Dependency Referral Form* (Attachment C) and faxes it to the referral source.

## **VII. Assessment Process**

### **A. SUD Treatment Agency**

1. Completes the expanded SUD assessment and UA within five working days of contact with the client or the SW unless the Agency must access interpreter services.
2. Provides the written report to the SW within five working days of the assessment interview and ensures that they are received by the SW in advance of the court hearing.
3. If requested, the Agency shall offer at no cost to the client onsite childcare services. If onsite childcare is not available at the Agency, the SW will ensure these services are provided to the family offsite.
4. TARGET data entry shall be entered as follows:
  - a. For all clients who meet the CA - Parents in Reunification eligibility requirements the State Special Project Code: 'CA-Reunite' must be entered.
  - b. For all other clients, the State Special Project Code: 'DCFS – Expanded Assessment' must be entered.

## **VIII. SUD Treatment Services Process**

### **A. SUD Treatment Agency**

1. Admits the client into outpatient treatment as soon as possible or per the County priority guidelines, whichever is the shortest period of time, utilizing the treatment recommendations of the current expanded SUD assessment.

2. If requested, the Agency shall offer at no cost to the client onsite childcare services. If onsite childcare is not available at the Agency, the Agency shall ensure these services are provided to the family offsite. If onsite or offsite childcare program enrollment is at capacity at client treatment entry, the Agency notifies the referral source of the need for childcare services until the estimated date of an opening in childcare. The Agency shall also notify the referral source and client of the actual date of childcare availability.
3. If inpatient treatment is warranted, the Agency shall:
  - a. Assist the client in securing a referral.
  - b. Maintain the client in outpatient treatment until they enter inpatient treatment.
  - c. Notify the SW within two working days by FAX of the following:
    - i. Need for inpatient treatment;
    - ii. Care plans for any children in their care while the client is in the inpatient program; and
    - iii. The projected entry date when known.
4. Ensures all pertinent *Consent for Release of Information* forms are current and up-to-date to avoid any lapses in the ability to communicate.
5. Provides monthly written progress reports to the SW and other involved parties that address compliance with treatment or lack thereof.
6. Notifies the referral source within two working days of client's unexcused absences from treatment groups and appointments, drug/alcohol use, and other significant events and documents them in the client's file.
7. Documents in the client's treatment plan when his/her child is being returned to his/her care and the plans to facilitate this transition.
8. Provides discharge plans, continuing care plans and recommendations to the referral source in writing. This may be a monthly report or a separate discharge plan report.
9. Completes TARGET reporting in a timely and accurate manner.
10. For all clients who meet the CA - Parents in Reunification eligibility requirements the State Special Project Code: 'CA-Reunite' must be entered into TARGET at assessment and admission.
11. Encourage joint treatment planning, discharge planning and continuing care planning involving the SW, the client, and others as appropriate, to maximize the client's recovery.
12. Informs the SUD treatment counselor, within two working days of positive results of any additional UA monitoring of the client and provides copies of the results that include the date of the collection and the drugs screened for.

- Signed:

Jackie MacLean  
Director  
Department of Community and Human Services